

**U.S. DISTRICT COURT FOR THE NORTHERN DISTRICT OF ILLINOIS  
ATTORNEY APPEARANCE FORM**

NOTE: In order to appear before this Court an attorney must either be a member in good standing of this Court's general bar or be granted leave to appear *pro hac vice* as provided for by Local Rules 83.12 through 83.14.

In the Matter of  
Dorothy Murphy vs. Fairmont Care Center

Case Number: 08 C 2027

AN APPEARANCE IS HEREBY FILED BY THE UNDERSIGNED AS ATTORNEY FOR:  
Dorothy Murphy

NAME (Type or print) J. Matthew Pfeiffer	
SIGNATURE (Use electronic signature if the appearance form is filed electronically) s/ J. Matthew Pfeiffer	
FIRM Fuchs & Roselli, Ltd.	
STREET ADDRESS 440 West Randolph Street, Suite 500	
CITY/STATE/ZIP Chicago, Illinois 60606	
ID NUMBER (SEE ITEM 3 IN INSTRUCTIONS) 6272868	TELEPHONE NUMBER (312) 651-2400
ARE YOU ACTING AS LEAD COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU ACTING AS LOCAL COUNSEL IN THIS CASE? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
ARE YOU A MEMBER OF THIS COURT'S TRIAL BAR? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS CASE REACHES TRIAL, WILL YOU ACT AS THE TRIAL ATTORNEY? YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
IF THIS IS A CRIMINAL CASE, CHECK THE BOX BELOW THAT DESCRIBES YOUR STATUS. RETAINED COUNSEL <input type="checkbox"/> APPOINTED COUNSEL <input type="checkbox"/>	